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**TRANSMITTAL
FORM***(to be used for all correspondence after initial filing)*

Application Number	10/698,077
Filing Date	October 29, 2003
First Named Inventor	Cynthia B. Robinson
Art Unit	1617
Examiner Name	Kevin J. Capps

Total Number of Pages in This Submission

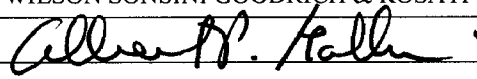
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Attorney Docket Number	30775-715.201
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ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): RESPONSE TO RESTRICTION REQUIREMENT
<div style="border: 1px solid black; padding: 5px;"> Remarks </div>		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm Name	WILSON SONSINI GOODRICH & ROSATI		
Signature			
Printed Name	Albert P. Halluin		
Date	March 6, 2007	Reg. No.	25,227

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being electronically filed with the USPTO addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Gloria R. Chavarria	Date	March 6, 2007

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